

ISSUE SLIP STATE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		12	5/14
FORMALITY REVIEW	S.H.	1025	6/15/01
RESPONSE FORMALITY REVIEW	A.T.	1071	12/03/01

BEST AVAILABLE COPY

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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AL  
 6/16  
 30227  
 12/03/01